

“Prevents payments from being lost or stolen...”

CONVENIENT

No checks to write and no postage to pay.

RELIABLE

Your bill is always paid on time, even if you are away on vacation.

SAFE

Prevents payments from being lost or stolen in the mail.



Visit us at
Issaquahwa.gov/UtilityBilling

City of Issaquah
P. O. Box 1307
Issaquah, WA 98027-1307

ISSY EASY PAY

Issaquah's Automated Water & Sewer Account Payment Service



Finance Department

**P. O. Box 1307
Issaquah, WA 98027-1307
Phone (425) 837-3070
Fax (425) 837-3029**

Issy Easy Pay

What is Issy Easy Pay?

- ❖ Issy Easy Pay is an automated payment withdrawal service which pays your utility (water, sewer and/or storm) bills directly from your checking or savings account.
- ❖ Issy Easy Pay is a free service sponsored by the City of Issaquah Finance Department.
- ❖ Issy Easy Pay is a simple, safe, convenient and reliable option to bill paying.
- ❖ Apply now and enjoy the benefits of no postage to pay, no checks to write and no late fees to worry about.

How do I sign up for the program?

- ❖ Contact the Finance Department at (425) 837-3070 for an application.
- ❖ Complete and sign the Authorization Agreement.
- ❖ Return the authorization form and attach a voided check or deposit slip from the account to be withdrawn from.

***“No checks to write,
no postage to pay...”***

Frequently Asked Questions

Q. What type of bank account do I need to participate in this service?

A. Issy Easy Pay can withdraw funds from any personal or business checking or savings account.

Q. When will the money be withdrawn from my account?

A. The Finance Department will deduct your utility payment on the posted due date, the 20th of the month.

Q. If the due date falls on a Saturday, Sunday or a holiday, will I be charged a late fee?

A. You will not be assessed a late fee. If the 20th falls on a weekend or holiday, the payment will be withdrawn on the following business day.

Q. Will I continue to receive a bi-monthly bill in the mail?

A. Yes. You will continue to receive a bill that details the charges and usage for the service period. Your bill will also indicate you are a participant in the Issy Easy Pay program.

Q. How will I know when my Issy Easy Pay automatic service takes effect?

A. Your bill will acknowledge you are set up on Easy Pay when the word “autopay” appears in the amount due box in the top right hand corner of the bill. All (new and updated) routing and account numbers will take one billing cycle to pre-note with the Bank. You will need to pay the bill until the word “autopay” appears in the amount due box.

Q. What if I want to cancel my service with Issy Easy Pay?

A. Simply send a letter referencing your account number and indicating you want to cancel service. Allow 10 business days for processing.

Call (425) 837-3070



Finance Department
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AUTHORIZATION AGREEMENT
ISSY EASY PAY AUTOMATIC PAYMENT SERVICE

PLEASE PRINT

Customer Name: _____

Service Address: _____

Water/Sewer Account Number: _____ - _____ - _____

I/we hereby authorize the CITY OF ISSAQUAH to automatically withdraw from my/our checking or savings account, identified below, the amount stated on my/our bi-monthly statement for all water, sewer, tax and/or stormwater fees at the above service address and the FINANCIAL INSTITUTION named below to accept such withdrawals initiated by the CITY. The withdrawal shall be made from my/our checking or savings account on the due date, the 20th day of the month next succeeding the end of the billing period declared on the bi-monthly statement.

Financial Institution: _____ Branch: _____

City: _____ State: _____ Zip: _____ Telephone: _____

Transit/Routing No.: _____ Account Number: _____

Withdraw funds from (check only one): ☐ Checking ☐ Savings

This authorization will take one billing cycle to pre-note after receiving your voided check/savings slip. You will need to continue to pay your bill until the pre-note process is complete and the word (auto pay) appears in the amount due box.

This authorization is to remain in effect until the CITY has received notification from me (or either of us) of termination in such time as to afford the CITY and the FINANCIAL INSTITUTION a reasonable opportunity to act on it.

Signature: _____ Date: _____

Additional Signature

On Account: _____ Date: _____

**ATTACH A VOIDED CHECK FOR CHECKING OR DEPOSIT SLIP FOR SAVINGS
ACCOUNT TO THIS FORM**